Welcome to

ADAMS for SUPERVISORS

ADAMS for Supervisors

Course Objectives

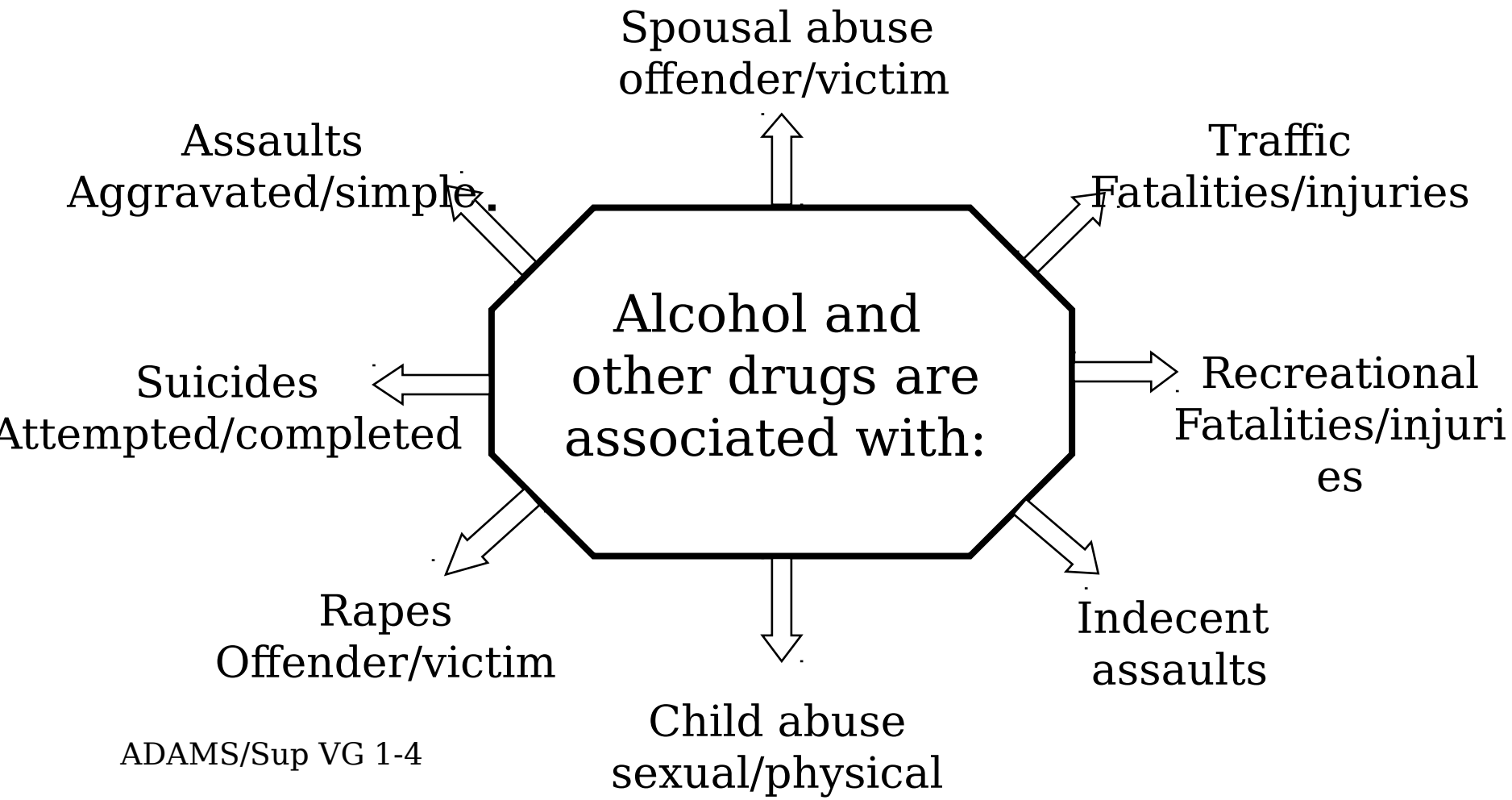
- List key elements of NADAP and The Right Spirit campaign
- Describe AOD threat to readiness
- Describe supervisor’s role in NADAP
- Identify problems and intervene proactively

Module 1
Introduction

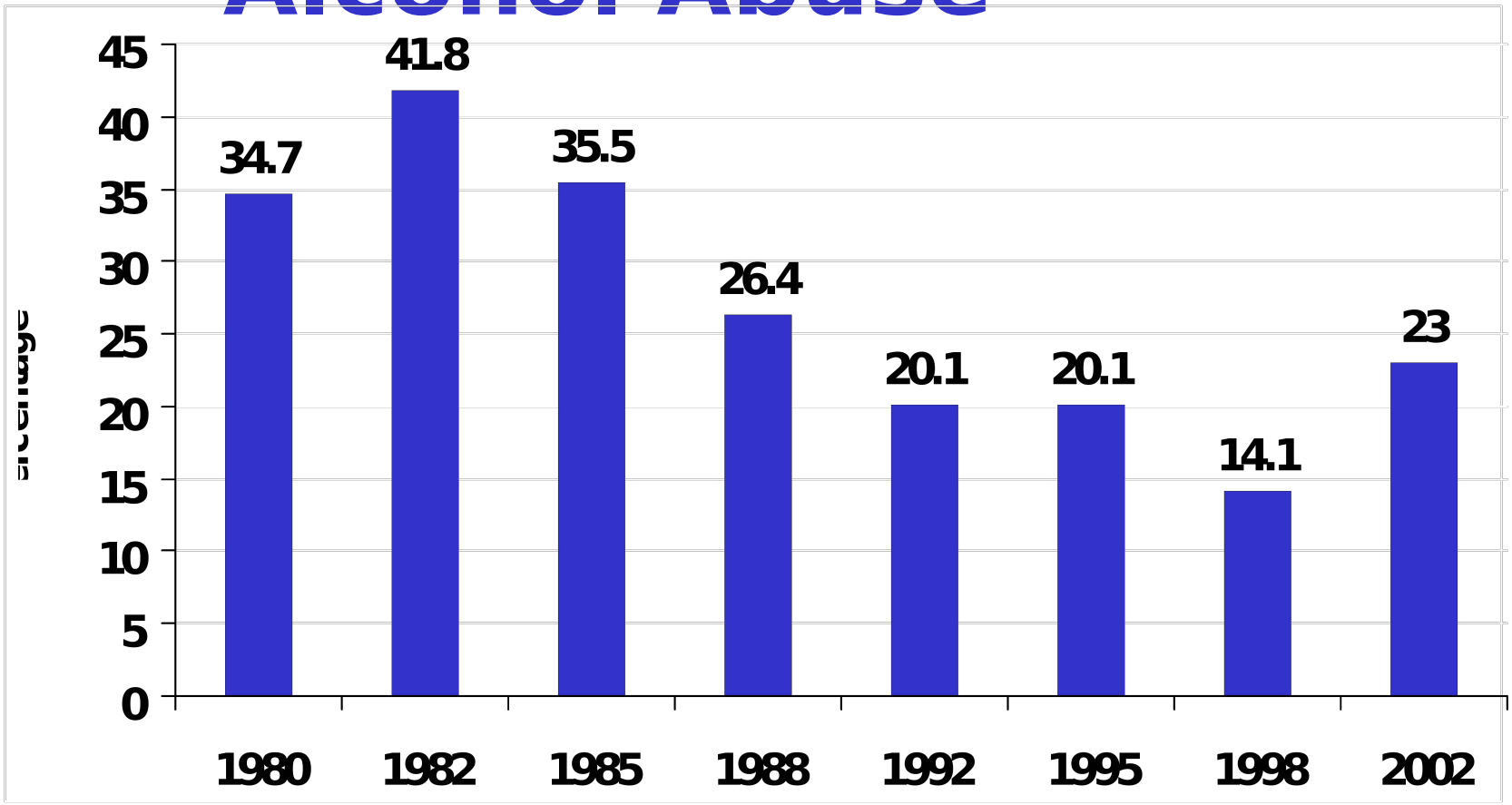
Objectives:

- State purpose of ADAMS
- Discuss the impact of substance abuse
- Describe threat to readiness posed by substance abuse
- Identify links between substance abuse, and health, safety and discipline issues

Impact of Substance Abuse



Navy Loss of Productivity Due to Alcohol Abuse



ADAMS/Sup VG 1-5

SOURCE: PERS 602 ADMITS

The Right Spirit Campaign

Alcohol Abuse Prevention and Deglamorization Campaign

Module 2
Drug Policy and Programs

Module 2
Drug Policy and Programs

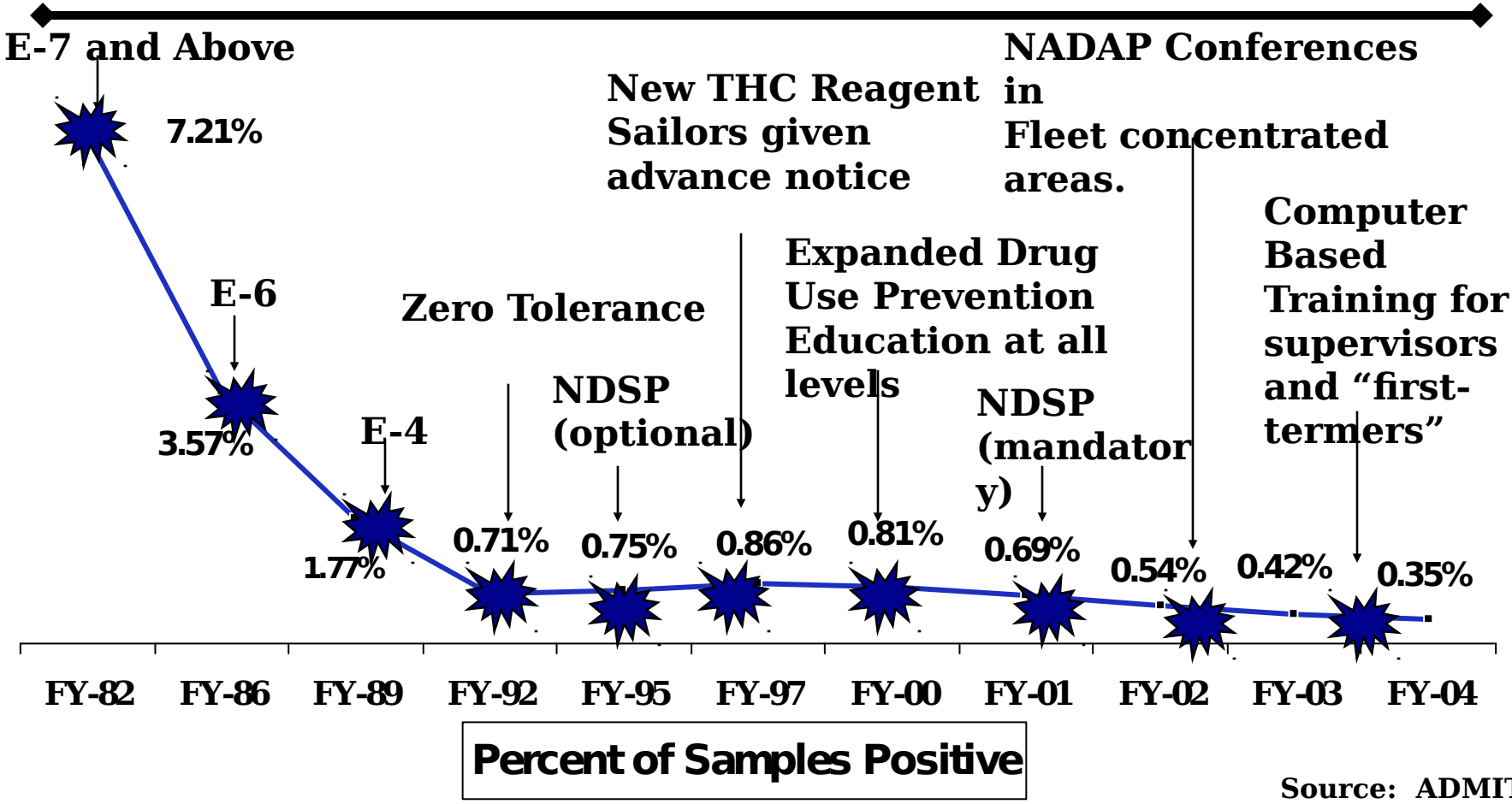
Objectives:

- Describe growth and success of Navy drug policy and programs
- Discuss the latest drug threats to the Navy
- Discuss current policy and programs
- State importance of maintaining vigilance against drug abuse

1980 DoD Survey of Non-Medical Drug Use

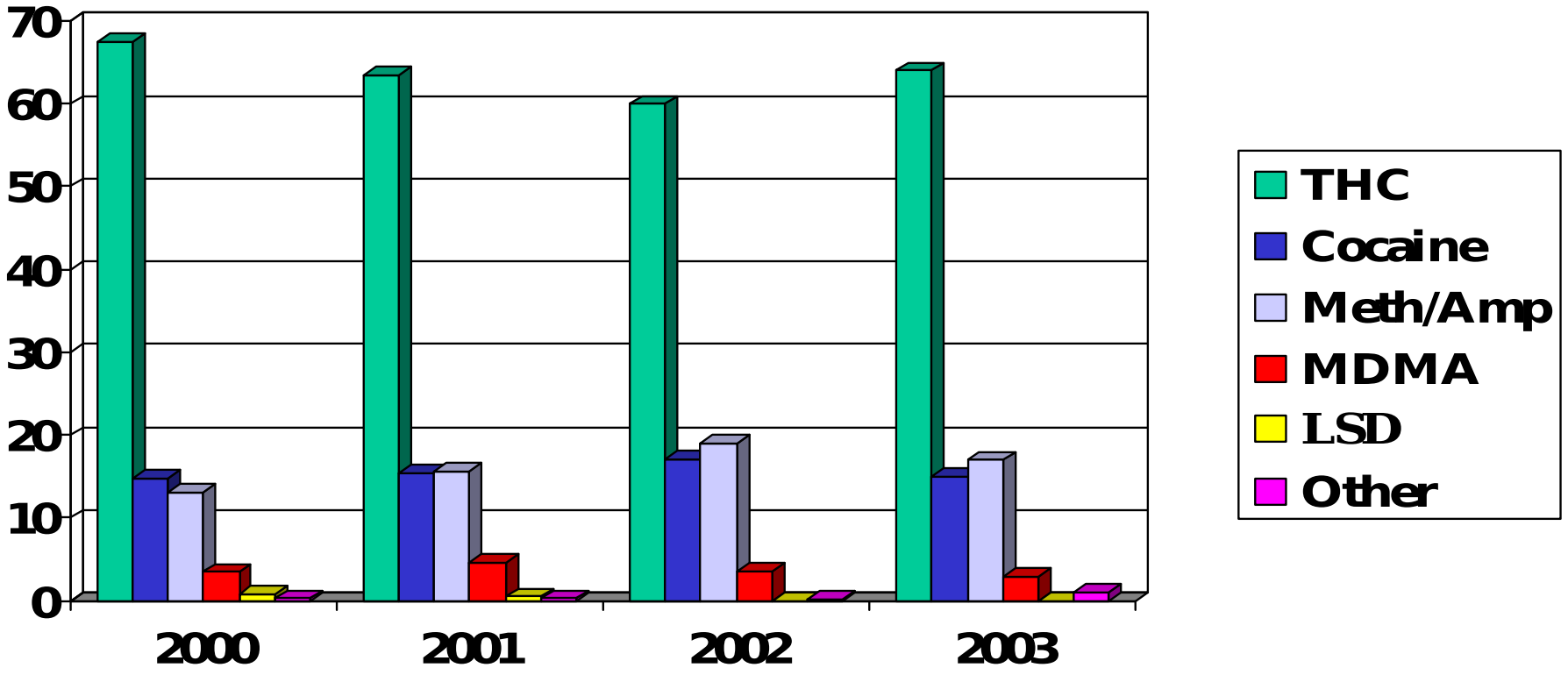
- **Navy self-reporting using drugs other than alcohol - 33%**
- **E1 - E5 reporting marijuana use within past 30 days - 47%**

History of Navy's "Zero Tolerance"



Source: ADMITS FY-04 data thru 31JAN04

DRUG PREVALENCE DATA
FY 00-03

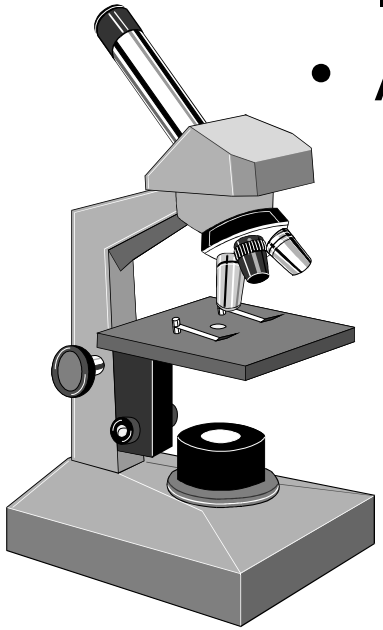


SOURCE: PERS 602 ADMITS

All results, positive or negative, are kept on file for 3 years

<u>Tested by Navy urinalysis</u>

- LSD
- Morphine
- Codeine
- Heroin
- Designer drugs
  - e. g. Ecstasy
- PCP



<u>Not tested by Navy Drug Labs</u>

- Inhalants
- Anabolic Steroids

Drug Policy

- Zero tolerance for use of illicit drugs
- Process for administrative separation
- Treatment offered
  - All paperwork for discharge will be completed prior to treatment

Urinalysis Program

- Commands test 10-40% monthly
- A minimum of one unit sweep per year
- Positive samples tested three times:
  - different stations;
  - first two identify drug presence;
  - third “fingerprints” drug;
  - need 3 positives to result in positive report.

SOURCE: OPNAV 5350.4C Change 1.

Module 3
Alcohol the Substance

Module 3
Alcohol the Substance

Objectives

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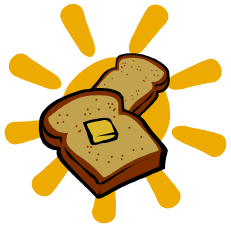
- List components of alcohol
- State effects alcohol has on emotions and behavior
- Define basic drinking patterns
- List basic signs and symptoms of an alcohol problem

Alcohol is:

- A **Drug** - but do we treat it as a drug?



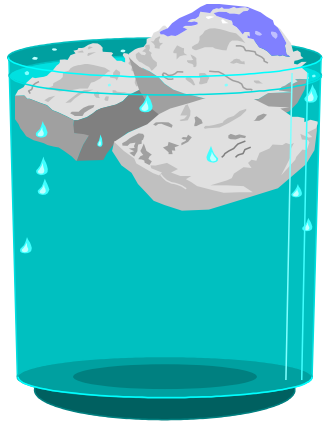
- A **Food** - 170 empty calories
- A **Toxin** - Acetaldehyde

A Drink = 1/2 oz of alcohol

12 oz.

5 oz.

1.5 oz.



More than a drink: Long Island Iced Tea, Zombie, Margarita, Shooter, Martini, 151 rum, etc.

How alcohol is processed

- Liver processes about ½ oz of alcohol per hour
- Excess released into bloodstream
- Chemicals released in brain cause the “high”
- Synergistic effect when combined with other drugs

BAC and Behavior

- .01 - .04% Impaired ***judgment***
- .05 - .09% ***Motor*** and ***perception*** skills diminished
- .10 - .14% Slurred ***speech,*** exaggerated ***emotions***
- .15 - .20% Disorientation
- .21 - .30% ***Severe*** motor ***disturbance***, passing out
- .31 - .39% Serious loss of ***feeling*** and ***sensation***.
- .40 - .60% Unconsciousness, ***coma or DEATH!!***

Source:

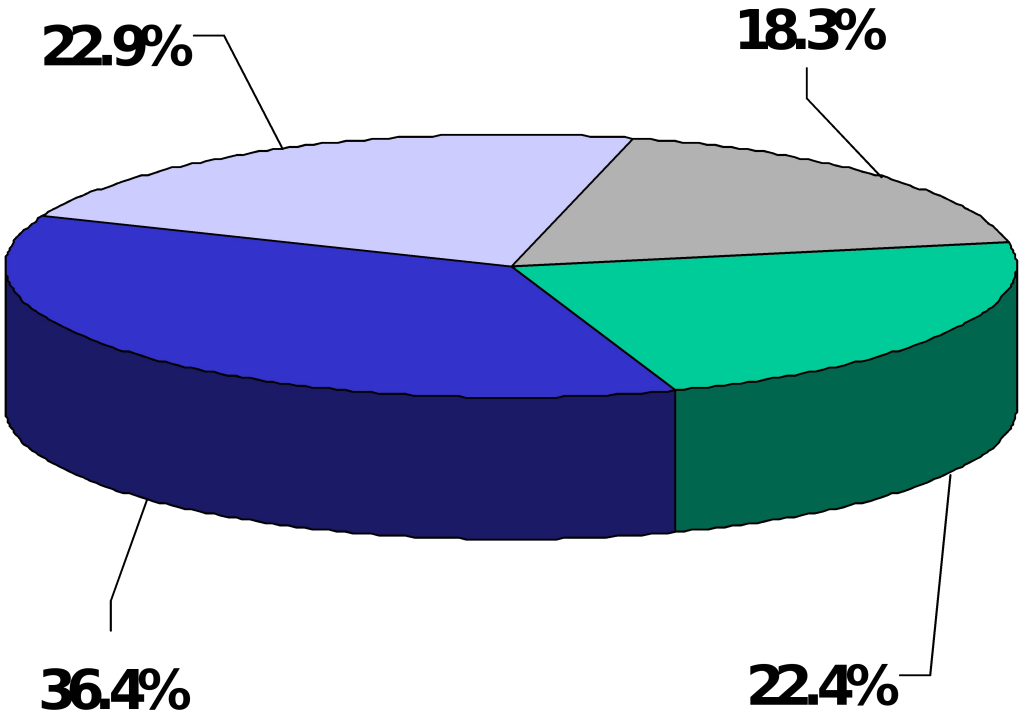
BAC and Driving

- The likelihood of a car crash at:

BAC	Likelihood
• **.01 - .04%**	es greater
• **.05 - .09%**	s greater
• **.10 - .14%**	greater
• **.15% 380**	greater

Source: *NIAAA ALCOHOL ALERT No. 31 PH 362 Janu*

Navy Drinking Patterns



- Abstinence
- Responsible Use
- Moderate/Heavy
- Heavy

2002 DoD Survey

Moderate Drinking

As defined by the *Department of Health and Human Services* to avoid Health complications

2 per day
Men

1 per day
Women

But not if:

- Attempting pregnancy
- Underage
- Recovering
- Nursing
- Pregnant
- Driving
- Doing skilled tasks
- Can't control intake
- Taking medication

Spectrum of Drinking

FIRST CONTACT
EXPERIMENTATION
INTEGRATION
ABUSE: Problems we see - financial, late to work, hangovers at work, alcohol on breath at work, relationship problems, blackouts, legal, etc.

STAGES OF ADDICTION	
EARLY	BLACKOUTS, TOLERANCE, SNEAKING, HIDING
MIDDLE	LOSS OF FAMILY, FRIENDS, JOBS
LATE	SPIRITUAL DESPERATION, HOPELESS, & DESPERATE

Temp Source: IMPACT manual

Alcohol Abuse

"The use of alcohol to an extent that it has an **adverse effect** on performance, conduct, discipline, mission effectiveness, and/or user's health, or Department of the Navy, or leads to unacceptable behavior as evidenced by one or more alcohol-related misconduct."

OPNAVINST 5350.4C

Alcoholism

"A chronic, progressive disease in which the individual is addicted to alcohol. Drinking and symptoms grow worse over time (same as alcohol dependence). For U.S. Navy purposes, the term 'alcohol dependence' is used."

OPNAVINST 5350.4C

Alcoholism –
A Treatable, Preventable Disease

- World Health Organization 1951
- American Medical Association 1956
- American Hospital Association 1957
- American Psychiatric Assn 1965
- Public Law 92-129 1971
- U.S. Navy 1972

Signs and Symptoms

- **Problems** - marital, family, financial, legal, relationships, responsibility, work etc.
- **Denial**
- **Blackouts**
- **High tolerance**

Bottom line: If drinking causes problems, drinking is a problem

Predictable Path of Alcoholism

Problem S:

Minor Disciplinary

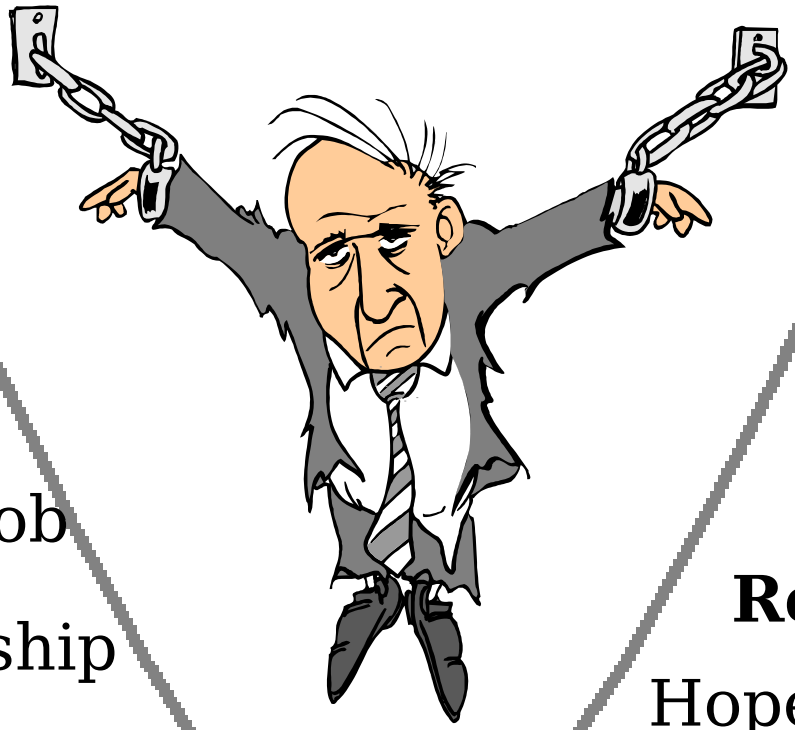
Financial

Family

Major Job

Relationship

Hospital, Institution, Jail or Death



NEW LIFE!

Return of self-esteem

Positive thinking

Recovery *begins*

Hope

Intervention

Supervisor's Role: Raise The Bottom

Module 4
Alcohol Policy

Module 4
Alcohol Policy

Objectives

- State the elements of the Right Spirit Campaign
- State current policies and programs related to prevention.
- Define alcohol related incident
- State the difference between discipline and help
- Identify key elements of a Command Prevention Program
- State the Navy's vision related to alcohol abuse

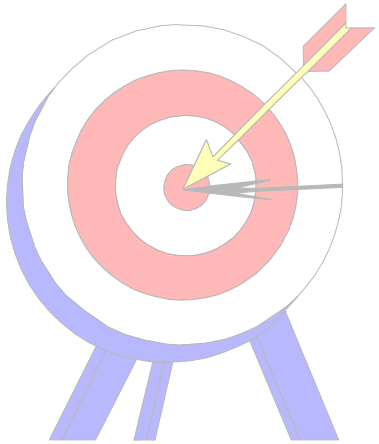
The Right Spirit Campaign

Alcohol Abuse Prevention and Deglamorization Campaign

ADAMS/Sup VG 3-32

Right Spirit Goals

- Enhance Fleet readiness
- Provide a safe and productive working environment
- Improve QOL for Sailors and families
- Responsible Use



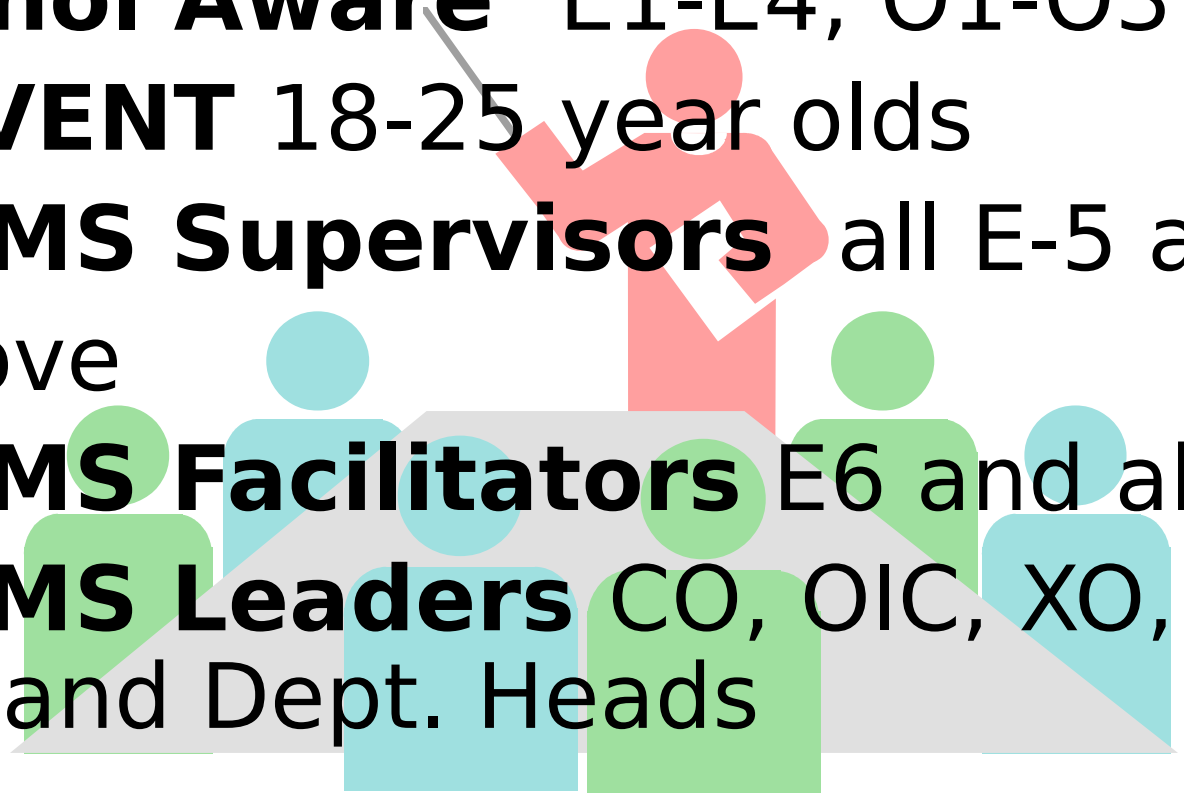
Emphasis: Responsibility

- Personal
- Shipmate
- Leadership
- Command

.while promoting healthy lifestyles

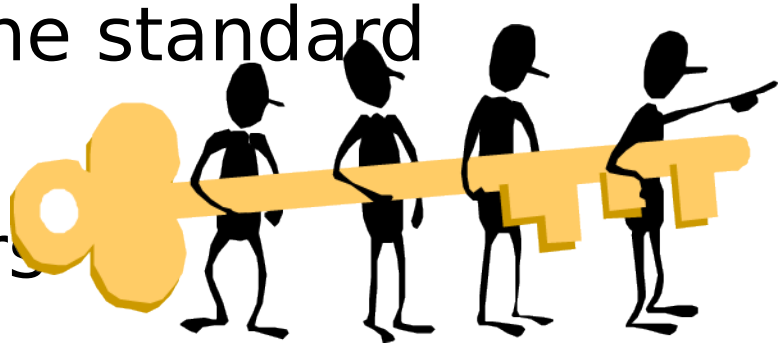
Education & Training for ALL Hands

- **Alcohol Aware** E1-E4; O1-O3
- **PREVENT** 18-25 year olds
- **ADAMS Supervisors** all E-5 and above
- **ADAMS Facilitators** E6 and above
- **ADAMS Leaders** CO, OIC, XO, CMC and Dept. Heads



The Navy's Vision

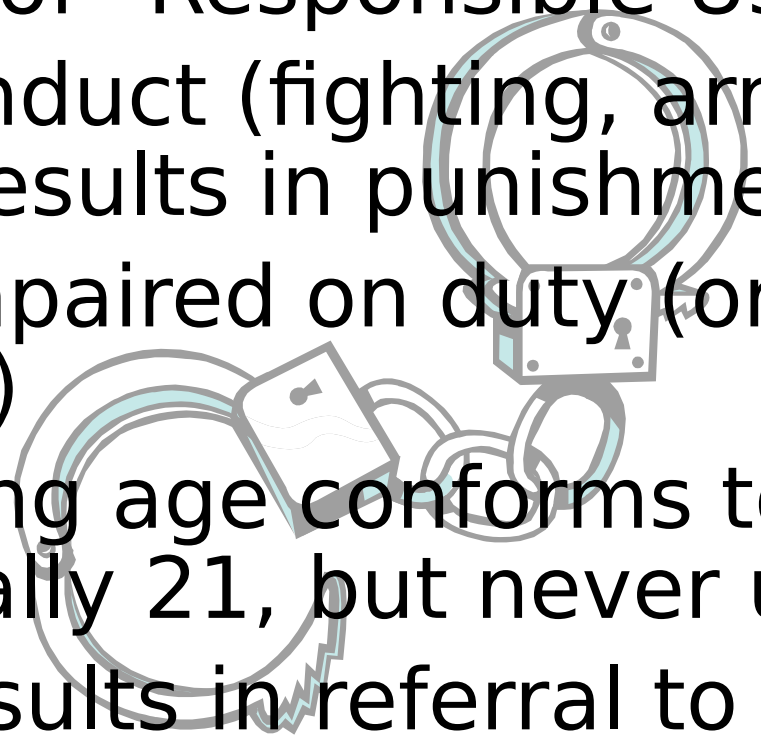
- 20 years from now…
  - No longer losing Sailors in alcohol related auto crashes
  - Zero Sailors arrested for DUI
  - Less than 1% of our Sailors affected
  - Responsible use is the standard
  - Abuse not tolerated
  - Proactive Supervisors



Responsible Use

- Drinking lawfully and responsibly:
  - the appropriate quantity
  - in an appropriate place
  - at an appropriate time
- No drinking to the extent that it impairs:
  - judgment
  - dependability
  - reliability
- No drinking and driving

The Rules

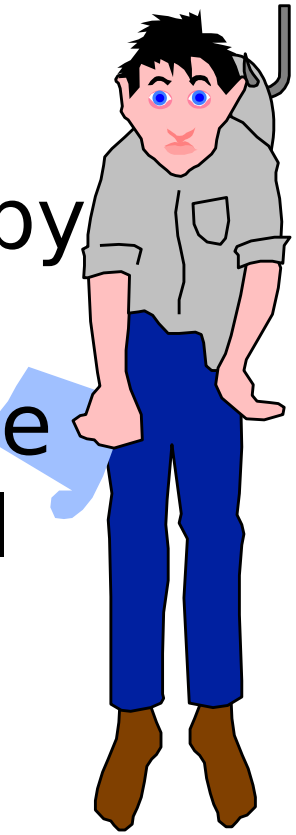


- Policy of “Responsible Use”
- Misconduct (fighting, arrests, DUI, etc.) results in punishment
- Not impaired on duty (or in duty status)
- Drinking age conforms to local law (typically 21, but never under 18)
- ARI results in referral to SARP

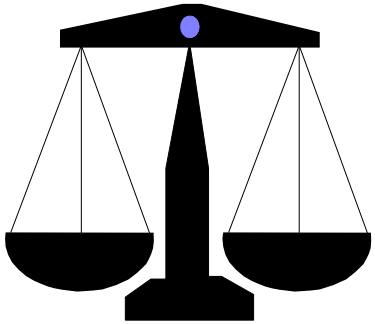
Alcohol Related Incident

"An offense, punishable under the UCMJ or civilian laws, committed by a member, to which, in the judgment of the member's CO, the member's consumption of alcohol was a contributing factor."

OPNAVINST 5350.4C



Balancing Help and Discipline



Alcohol Related Incident

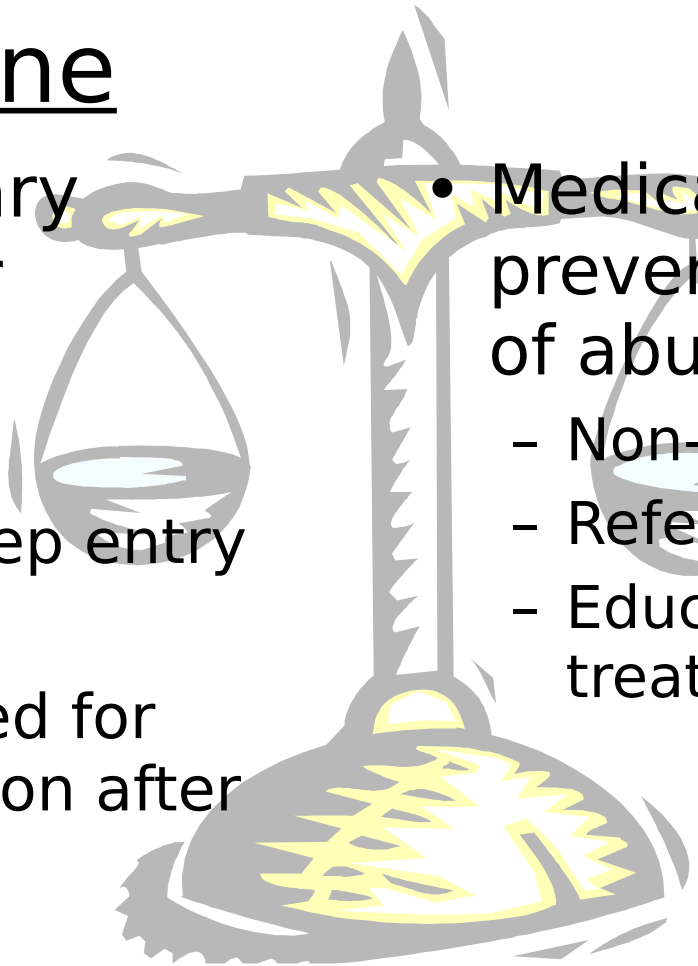
Consequences for Behavior (via Chain of Command)

Medical Assistance (via DAPA)

Defining the Balance

Discipline

- Disciplinary action for behavior
  - NJP
  - Eval/Fitrep entry
  - ADSEP
  - Processed for Separation after 2nd ARI



Help

- Medical referral for prevention/treatment of abuse/dependence
  - Non-punitive
  - Referral through DAPA
  - Education and/or treatment as appropriate

Medical Screening Results

- No problem
- Isolated incident or potential problem
  - Alcohol IMPACT
- Pattern of Alcohol Abuse
  - Education/Treatment for Abuse
- Alcohol Dependence
  - Education/Treatment for Dependence

Treatment vs. Prevention

- “Treatment is like repairing the bodies after they’ve fallen off the cliff onto the rocks below. Prevention is doing simple things like building a fence to stop them from falling.”

Fr. Martin

(renowned speaker in field of alcohol awareness)

Successful Command Substance Abuse Prevention Program

- Announce command policy
- Educate all hands
- Deglamorize alcohol
- Reduce risks i.e. limit availability
- Provide alternatives
- Glamorize alternatives
- Hold people accountable consistently

Module 5
The Supervisor's Role

Module 5
The Supervisor's Role

Objective: Describe Supervisor's role in

- Prevention
- Observation
- Documentation
- Intervention
- Referral
- Treatment
- Aftercare

Prevention

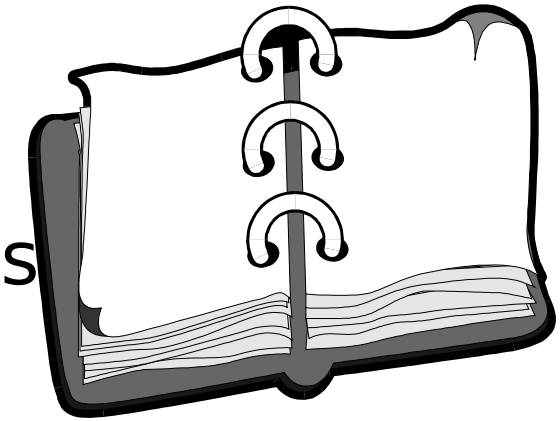
- Lead by example
- Know and support command policy
- Ensure Sailors attend education
- Ensure consistent consequences
- Promote alternatives
- Promote climate which says “It’s OK not to drink”

Observation

- Warning signs and behaviors
  - Troubles at work
  - Troubles off the job
  - Changes in friends/relationships
  - Personality changes
  - Suicide gestures

Documentation

- Supervisory tool (positive/negative)
- Progressive discipline
- Memory aid
- Aid to determine patterns
- Basis for intervention
- Assistance to DAPA and SARP in addressing substance abuse problems



Intervention

- Prepare
  - Review and organize documentation
- Schedule
  - Never when feelings running high
  - Never if member under the influence
- Communicate **job-related** concerns
- Be specific and non-judgmental

Defense Mechanisms

- Denial
- Smokescreens
- Explosions
- Intellectualizing
- Prejudice
- Repentance

Your response: stay on topic, stick to the facts.

Referrals

- Self /Safe Haven
- Command, designed to help a sailor before and incidents occurs
  Reduces impact on readiness
  No Discipline
- Incident
  Impacts readiness
  Consequences for behavior

DAPA Administrative Screening

- DAPA performs admin screening
- Supervisors provide input
  - As detailed as possible
  - List any potential problem indicators
- DAPA coordinates with SARP

Role During Treatment

- Support treatment times and attendance
- Provide work guidelines
- Visit Sailor at SARP
- Attend commencement ceremony

Re-entry after Treatment

- Establish clear:
  - direction for work assignments
  - standards for performance and behavior
- Support aftercare plan
- Avoid special treatment

Sample Aftercare Plan

- Meet weekly with Command DAPA
- Attend 12-step meetings 2 times a week
- Urinalysis testing
- Participate in continuing care

Each aftercare plan is personalized and developed by the member, SARP, DAPA and CO

Aftercare and Continuing Care

Aftercare:

- Command
- Administrative monitoring
- Up to 12 months

Continuing Care:

- Medical
- Clinical treatment
- Variable

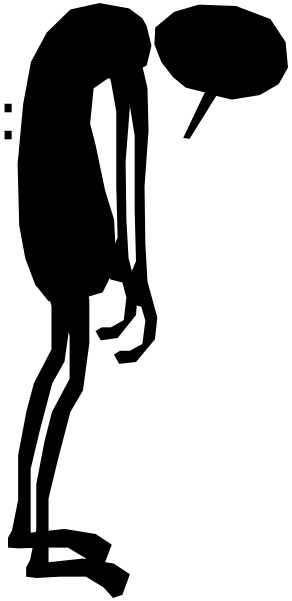
Relapse

- Signs of relapse usually occur before a return to drinking and before an incident
- Look for relapse signs
- Recognize return to old behaviors

At first sign of relapse, contact DAPA

Alcohol and Suicide

- Alcohol is a depressant drug
- Depression is underlying cause of suicide
- Alcohol plays major role in suicides of the:
  - Occasional user
  - Abuser
  - Alcohol dependent



Take ALL suicide talk seriously.
Reach out and get immediate help.
Don't leave the Sailor alone.

Module 6
Into Action

Module 6
Into Action

Objectives:

- Define enabling
- Identify personal enabling behaviors
- Identify methods of deglamorization, prevention, and education for yourself and your work center

Enabling Defined

In the context of this course:

- Allowing individuals to continue their abusive behavior without suffering the natural consequences of their behaviors.

Enabling: What Is It?

- **HELPING** people avoid facing facts by minimizing actions
- **RESCUING** people out of troublesome situations caused by their own actions
- **PROTECTING** people from facing the consequences of their own actions

Enabling: Who Does It?

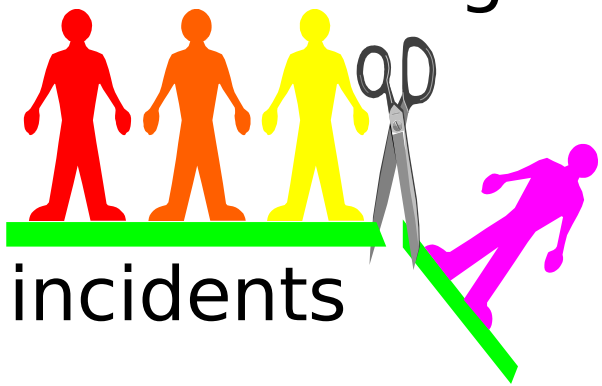
- Well-intentioned supervisors and leaders
- Leaders and supervisors who care about their people
- Uninformed supervisors and leaders
- Co-workers, friends, spouses, etc.

What An Enabler Says

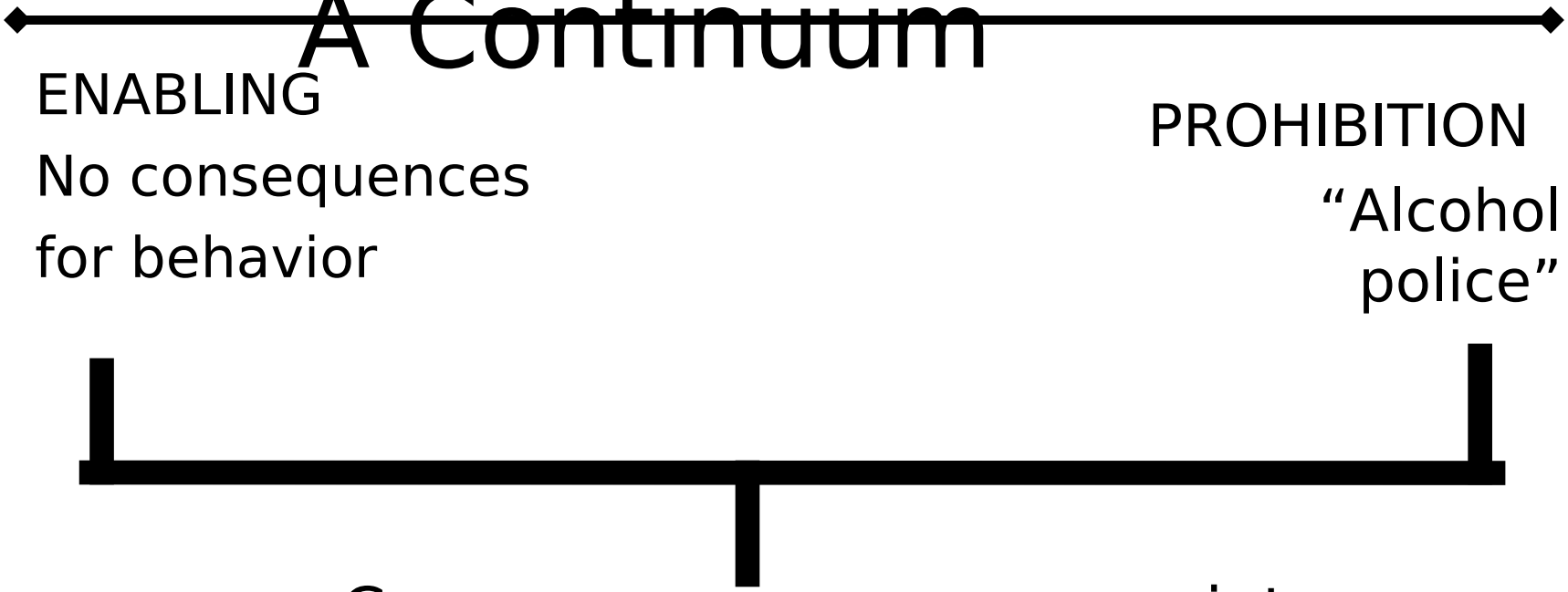
- “I don’t want to affect their career”
- “Maybe if I were a better supervisor she wouldn’t have gotten into trouble”
- “I don’t want to label anyone as a drunk”
- “It’s too hard to confront and document”
- “There’s nothing I can do”
- “I can’t afford to lose them from the job”

Enabling Consequences Harmful to:

- **The individual**
  - Encourages irresponsible or self-destructive behavior
  - Prevents individuals from realizing what they're doing
- **The Navy**
  - Increases number of incidents
  - Impacts readiness



Enabling vs. Prohibition A Continuum



- Consequences are appropriate
- Expectation is responsible use
- Use is deglamorized

Module 7 Summary

Module 7 Summary

Objectives:

- Review:
  - Goals
  - Key points
  - The Navy's vision

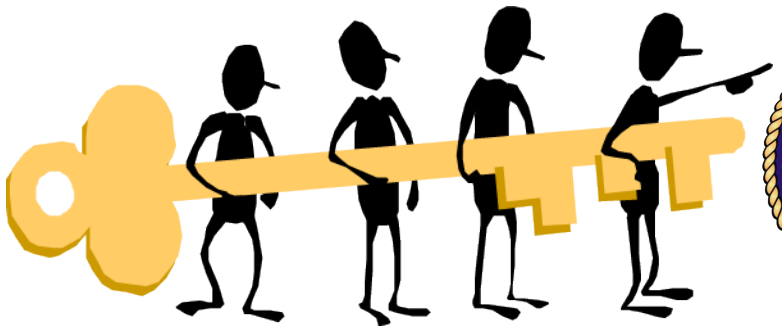
Goals revisited

- State threat to readiness
- Support Right Spirit campaign
- List key elements of the Navy's drug and alcohol policies and programs
- State supervisor's role in NADAP
- Identify problems and intervene proactively

Key Points

- Impact of substance abuse
- AOD policies and programs
- Alcohol and drinking patterns
- Right Spirit campaign
  - Personal, Shipmate, Leadership, Command
- Supervisor's role
  - Prevention, Observation, Documentation, Intervention, Referral, and Treatment

The Vision



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  - Proactive supervisors

Part of Problem or Part of Solution

- Do you:
  - lead by example?
  - ensure your Sailors are trained?
  - glamorize or deglamorize alcohol?

- Are you <u>actively</u> involved in promoting alternatives and healthy lifestyles?